POSITION	INITIALS	ID NO.	DATE		
FEE DETERMINATION					
O.I.P.E. CLASSIFIER		1/-	11-0/1		
FORMALITY REVIEW	CW	949	· Metor		
RESPONSE FORMALITY REVIEW	4.1	TC 23/	105-18-01		

INDEX OF CLAIMS

•	Rejected	N	Non-elected
	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	

laim	Date	Clai	im	Date		Cla	ım	Da	ate	
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If more than 150 claims or 10 actions staple additional sheet here